

APPLICATION DATA SHEET**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)? No

Number of copies of CRF::

Title :: INHIBITORS OF RNA DEPENDENT RNA
POLYMERASE AND USES THEREOF

Attorney Docket Number:: 660081.443

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?: Yes

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.? No

First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Robert
Middle Name::	
Family Name::	Déziel
Name Suffix::	
City of Residence::	Montreal
State or Province of Residence::	PQ
Country of Residence::	Canada
Street of mailing address::	546 Chester Street
City of mailing address::	Montreal
State or Province of mailing address::	PQ
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	H3R 1W9

Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Eric
Middle Name::	
Family Name::	Fournier
Name Suffix::	
City of Residence::	Montreal
State or Province of Residence::	PQ
Country of Residence::	Canada
Street of mailing address::	460 Champ de Mars, #306
City of mailing address::	Montreal
State or Province of mailing address::	PQ
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	H2Y 1B4

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Arlène
Middle Name::
Family Name:: Roland
Name Suffix::
City of Residence:: Castries
State or Province of Residence::
Country of Residence:: France
Street of mailing address:: 4 rue de la pierre bleue
City of mailing address:: Castries
State or Province of mailing address::
Country of mailing address:: France
Postal or Zip Code of mailing address:: 34160

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming the benefit under 35 USC 119(e)	60/398,426	07/25/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	Micrologix Biotech Inc.
Street of mailing address::	3650 Wesbrook Mall
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V6S 2L2

401122 [9/19/01]